#### **Application Data Sheet**

# Application Information

Contract or Grant Numbers One::

Secrecy Order in Parent Appl.::

Application number:: Filing Date:: Application Type:: Regular Subject Matter:: Utility Suggested classification:: Suggested Group Art Unit:: CD-ROM or CD-R??:: Number of CD disks:: Number of copies of CDs:: Sequence Submission:: Computer Readable Form (CRF)?:: Number of copies of CRF:: Title:: Buttons for Person to Person Payments Attorney Docket Number:: 020375-002100US Request for Early Publication:: No Request for Non-Publication:: No Suggested Drawing Figure:: 5 Total Drawing Sheets:: 7 Small Entity?:: No Latin name:: Variety denomination name:: Petition included?:: No Petition Type:: Licensed US Govt. Agency::

No

#### **Applicant Information**

Given Name::

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: **Full Capacity** 

John Middle Name:: Joseph

Family Name:: Mascavage

Name Suffix:: Ш

City of Residence:: San Mateo

State or Province of Residence:: CA

Country of Residence:: US

Street of Mailing Address:: 701 Harvard Road

City of Mailing Address:: San Mateo

State or Province of mailing address:: CA

Country of mailing address::

Postal or Zip Code of mailing address:: 94402

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Middle Name:: Edwin

Family Name:: Dravenstott

Name Suffix::

Given Name::

City of Residence:: San Mateo

State or Province of Residence:: CA

Country of Residence:: US

Street of Mailing Address:: 2215 Salisbury Way

City of Mailing Address:: San Mateo

State or Province of mailing address:: CA

Robert

Country of mailing address::

Postal or Zip Code of mailing address:: 94403

Applicant Authority Type::

Inventor

Primary Citizenship Country::

US

Status::

**Full Capacity** 

Given Name::

Joris

Middle Name::

Family Name::

Vega

Name Suffix::

City of Residence::

San Francisco

State or Province of Residence::

CA

Country of Residence::

US

Street of Mailing Address::

2744 Sacramento Street, Apt. 301

City of Mailing Address::

San Francisco

State or Province of mailing address::

CA

Country of mailing address::

Postal or Zip Code of mailing address:: 94115

### **Correspondence Information**

Correspondence Customer Number::

20350

#### Representative Information

Representative Designation::

Representative Number::

Representative Name::

Primary

38,464

Darin J. Gibby

Associate

43,616

Tom Franklin

## **Domestic Priority Information**

Application::

Continuity Type::

Parent Application:: Parent Filing Date::

# **Foreign Priority Information**

Country::

Application number::

Filing Date::

### **Assignee Information**

Assignee Name::

Street of mailing address::

City of mailing address::

State or Province of mailing address::

Country of mailing address::

Postal or Zip Code of mailing address::